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SUBJECT: IAEA/PACT: IRAQ BEGINS CONSULTATIONS ON NATIONAL CANCER
THERAPY PROGRAM

REF: A) 08 UNVIE 541; B) 08 UNVIE 556

Summary

¶1. (U) In spring 2008, Mission provided, through the Embassy Baghdad Health Attache's office, an IAEA Program of Action for Cancer Therapy (PACT) "imPACT" questionnaire, which the Iraqi Ministry of Health and the Ministry of Science and Technology completed in August 2008. PACT subsequently produced an analysis of nuclear applications for cancer therapy, based on the GOI's responses. During the 2008 IAEA General Conference, Msnoffs participated in a meeting with the Iraqi Delegation and PACT to clarify short, medium, and long-term needs and assistance PACT might provide in Iraq. Mission conveyed general U.S. support for PACT, but made no commitments related to this project, though Iraqi interlocutors pressed for such assistance. Instead, the next step discussed was the GOI's need to delineate a concrete timeline, strategy, and cost estimate for donors to consider. PACT offered assistance in formulating a project package for donors. After months of inaction, Iraq recently sent two experts from the Ministry of Health to Vienna for March 30-April 4 consultations with PACT. The Iraqi experts hope to create a short, medium, and long term plan to take back to Baghdad for approval and eventual roll-out to potential donors.

¶2. (U) Action Request: Mission requests preliminary guidance on how to respond to Iraqi/PACT expectations that the U.S. will help fund this project either monetarily or through in-kind contributions. More detailed guidance will be needed once the GOI completes its plan. We would also welcome thoughts from colleagues at Embassy Baghdad regarding where these ideas might fit into USAID Iraq's strategic planning or any other on-going USG efforts in cancer therapy. From a Vienna perspective, a key benefit of this dialogue is the catalyst it provides for enhanced interaction between the IAEA Secretariat and IAEA board member Iraq. End Summary and Action request.

Major Issues

¶3. (U) As described in ref A, PACT is the IAEA's highly regarded program to make nuclear medicine for cancer treatment available in developing countries. The first stage in a PACT-Member State partnership is the completion of an imPACT questionnaire. The questionnaire provides a baseline of the cancer therapy infrastructure in a country and the problems that remain to be addressed. The Iraqi Ministry of Health and the Ministry of Technology and Science worked together on the questionnaire and

submitted the responses below to PACT Director Massoud Samiei in August 2008. Per ref B, the questionnaire revealed a number of problems associated with current Iraqi cancer therapy practices and capacity to treat patients.

14. (U) PACT's initial analysis focused on assessing urgent actions that can be taken to improve the situation for cancer patients in Iraq in the short-term. However, the security situation in Iraq and lack of funding are major obstacles. Missonoff reconfirmed in early March 2009 that PACT's analysis, per ref B, still holds. The major issues that need to be addressed are:

- Iraq has only two cancer centers, with a third one in the north that Ministry of Health officials claim they cannot access due to political tension. The centers have three "functioning" teletherapy machines for a population of approximately 29 million. Because of the lack of treatment capacity, plans for additional radiotherapy centers should be a priority. In order to do this, the national cancer control committee should conduct a feasibility study that provides a plan for expansion of centers based on patients' needs.
- Because of antiquated equipment, patients often wait six to 12 months for radiotherapy which means that only palliative treatment is given. Upgrading teletherapy equipment and training professionals to use the equipment properly is needed urgently. According to PACT, this could be done in parallel to the feasibility study for the expansion of centers.
- Three existing cobalt machines currently in use in Baghdad are also in need of refurbishment. According to Iraqi and PACT information, the sources utilize aged cobalt-60 which leads to very long treatment times of low quality. PACT advises that the machines be taken out of commission and the sources replaced. This of course

is predicated on the security situation allowing for transport of sources, material, and personnel. The refurbishment should also include installation of a cancer treatment simulator, dosimetry equipment, QA/QC kits, and computerized treatment planning software.

According to PACT, the Iraqis need to provide a list of prioritized plans for immediate short term action (such as replacing the radioactive sources, initiating a national cancer control plan, upgrading cancer registries, regulating supply cancer medicine, etc), and a list for longer-term actions in order to attract donors and keep their own inter-agency focused on the issue.

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15. (U) The Iraqi Ministry of Health, after six months of not moving on this issue, caused in part by difficulties in obtaining visas, has sent two clinical oncologists to Vienna for consultations with PACT on how to assemble a short/medium/long-term cancer therapy program. Consultations began on March 30 with IAEA health experts and will continue throughout the week with relevant IAEA offices. Dr. Mahdi Al-Saraj from the Baghdad Medical Center stressed the need for new sources (cobalt 60) for the three existing machines and requested USG assistance in this regard. [NOTE: Mission will report on full request for removal septel. END NOTE] Al-Saraj also noted the lack of training and the need to institute short and long-term training for technicians and oncologists. Al-Saraj did not have a clear idea of next steps with respect to promotion of a national cancer therapy program to potential donors because the Ministry of Health has not been in close contact with the Ministry of Foreign Affairs on this issue. Missionoff encouraged Iraqi interagency coordination and possible outreach by the Iraqi IAEA Governor on the margins of the June Board of Governors meeting to attract donor funding or services.

COMMENT

(U) Comment: Mission recommends USG adopt a supportive posture toward IAEA/PACT cooperation with Iraqi authorities in charting and

implementing a plan. PACT involvement would ensure that GOI plans provide for due safety and security protections on radiological sources at cancer centers. While the security situation will regulate the pace of implementation, the potential contribution this partnership could make to health and science in Iraq is consistent with broader U.S. assistance to Iraq reconstruction. A forthcoming U.S. approach would also be helpful to our effort to work with Iraq as a member of the IAEA Board of Governors and would further our interest in constructive IAEA-GOI relations.

SCHULTE